



Substance Abuse News

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Wisconsin Research to Practice Initiative

The Bureau of Substance Abuse Services' (BSAS) Research to Practice Initiative was launched publicly at the BSAS 6th Annual Statewide Meeting in Green Lake last Fall.

Formalizing Wisconsin's Research to Practice Initiative supports the unification of research, practice and education. It also supports the fundamental goals of Sinikka McCabe, Administrator of the Division of Supportive Living (DSL), in addressing the following questions in all DSL programs:

- Are people for whom our services are designed getting better?
- Are their lives and those of their significant others better?
- How do we know they are better?

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Former DHFS Secretary Joe Leean and DWD Secretary Jennifer Reinert

(See **Research** on Page 8.)

Milwaukee Family Services Coordination Celebration

A celebration to mark the completion and next steps of the Milwaukee Family Services Coordination Initiative was held at Marquette University Alumni Memorial Union on November 21, 2000. Participating in the event were Sinikka McCabe, Administrator, DHFS Division of Supportive Living, Susan Dreyfus, Administrator, DHFS Division of Children and Family Services, and Jennifer Noyes, Administrator, DWD Division of Economic Support. Joe Leean, Secretary of the Department of Health and

Family Services, and Jennifer Reinert, Secretary, Department of Workforce Development, were on hand to present their observations. Also involved in the project were Milwaukee County Department of Human Services, Milwaukee Area W-2, Safety Services and Substance Abuse and Mental Health providers, consumers, representatives of HMOs, representatives of the faith community and others.

In 1999, the Department of Health and Family Services and the Department of Workforce Development launched the Milwaukee Family Services Coordination Initiative. The goal of the initiative was to develop an integrated service network that would assist dependent and vulnerable families in gaining self-sufficiency by building upon their strengths and supporting them through formal and informal service networks. This was in response to the large number of families in Milwaukee County who are currently involved simultaneously in the W-2, Child Welfare, Substance Abuse and Substance Abuse/Mental Health Treatment Systems. (See **Milwaukee** on Page 9.)

From the Director

Reauthorization: The U.S. Congress and President Clinton this fall completed an important event for the substance abuse field. Congress passed, and the President signed, The Children's Health Act 2000 (HR4365). This legislation, among other provisions, reauthorized the Substance Abuse Mental Health Services Administration (SAMHSA), which contains the Substance Abuse Prevention and Treatment (SAPT) Block Grant and the Mental Health (MH) Block Grant to the states. SAMHSA has been operating on a continuing resolution for the past several years, and the action this fall reauthorizes the agency and the state block grants through federal fiscal year 2003.

Programs in the substance abuse portion of the bill are far ranging but include the following:

- Methamphetamine treatment.
- A provision to allow physicians to dispense buprenorphine, a narcotic drug for maintenance treatment or detoxification treatment of opiate addiction.
- A "hold-harmless" provision as SAMHSA moves to a different formula for calculating the block grant amounts to states. Without the hold-harmless provision, Wisconsin would have had a decrease in its award.
- As most states currently utilize planning councils, a provision was made to not mandate changes in this area. For Wisconsin, the Governor's appointed State Council on Alcohol and Other Drug Abuse (SCAODA) is recognized as a highly effective council.
- A charitable choice provision that allows religious organizations to be considered like other non-governmental entities for funding is included, but religious organizations are subject to state licensure/certification accountability standards.
- A provision clarifies that the SAPT Block Grant and MH Block Grant may be used to provide services to those with co-occurring disorders as long as the funds are used for purposes for which they are authorized, and states continue to maintain separate audit trails to account for the funds.

There are a host of other provisions that provide for a number of enhancements and opportunities for the substance abuse field. Wisconsin's current SAPT BG now totals approximately \$25 million annually and is an important resource for the substance abuse field in our state. The Children's Health Act of 2000 may be accessed by signing on to the following web site:

<http://thomas.loc.gov/home/thomas.html> then typing HR4365 in the "Bill number" search box. Next you will see a listing of five versions of the bill. Chose number 5, the "enrolled" bill. This will take you to the index of the bill. If you wish to view an "overview" of the bill, go either to the Bureau's web site at www.dhfs.state.wi.us/substabuse or to www.nasadad.org and click on "Public Policy" and select *Overview of SAMHSA Reauthorization*.

I encourage the reader to peruse the document and review the BSAS web in the next few weeks as we add highlights and provide additional information.

Philip S. McCullough

Substance Abuse News

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The Bureau of Substance Abuse Services in the Department of Health and Family Services' Division of Supportive Living endeavors to increase the quantity and improve the quality of prevention, intervention and treatment programs serving persons with substance abuse problems and their families; improve coordination among state agencies and within DHFS having responsibilities for substance abuse services; and improve substance abuse work force training and development.

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Spring Issue Deadline

April 6, 2001

The Wisconsin Consumer Initiative on Addiction and Recovery

The Wisconsin Consumer Initiative has held three meetings (October, December and February).

At the December meeting, Jeff Blodgett, Director of The Alliance Project, trained participants on effective media and public awareness strategies. The mission of this Initiative is to:

- Actively involve consumers, family members and affected others in planning, implementation and evaluation of substance abuse services, programs and policies.
- Increase both private and public awareness that treatment works.
- Value recovery and recovering individuals.
- Fight the stigma inherent in addiction.

The goals for the first quarter of 2001 are to produce an educational packet of materials, provide information and orientation to participants, and develop a plan for implementing future actions.

If you are a consumer (in recovery or affected by someone in recovery or treatment), contact Jackie Langetieg at (608) 267-7164 or e-mail: langetjb@dhfs.state.wi.us

Urban/Rural Women and TANF AODA Project

Over the past year, the Department of Health and Family Services, in cooperation with the Department of

Workforce Development, has administered a new statewide substance abuse treatment initiative for women and low-income individuals. The Urban/Rural Women's AODA and TANF AODA Project provided grants to seven treatment providers in Brown, Dane, Douglas, Eau Claire, Fond du Lac, Forest, Oneida, Vilas, and Washington Counties.

Grantees will address the special needs of women and low-income individuals with problems resulting from alcohol and other drug abuse, with special emphasis on parenting education, vocational and housing assistance, and coordination with other community programs while providing treatment under intensive care.

This new treatment approach incorporates ten core values into the program design:

- Collaboration with other systems in the community.
- Team approach across agencies that work with the family.
- Family-centered--with family as defined by the consumers.
- Self-sufficiency support in essential life domains.
- Consumer involvement in all aspects of the program.
- Gender and cultural competent treatment.
- Strong focus on employment.
- Building a service approach upon a-set of strengths, hopes and desires.
- Builds on natural and community supports.
- Individual growth that encourages learning, recovery and improvement dedicated to treating families and individuals with respect and dignity.

Prior to implementing this new initiative, BSAS sponsored staff training on this new approach to

treatment. National wraparound facilitators trained over 200 treatment providers and community members. On-going training efforts continue through the Wisconsin Treatment Outreach Project (WTOP), a project of the Wisconsin Women's Education Network (WWEN).

This statewide treatment initiative has provided services to 291 clients. Approximately 120 (41%) of the 291 clients admitted to the projects have received or are currently receiving, at a minimum, an AODA treatment service (day treatment or outpatient). This group of clients is also receiving case management or wraparound services. The remaining 171 clients (59%) received or are receiving continuing care support, case management, or wraparound services.

There are approximately 200 minor children affected by the projects' services. While the number of children reunited with their mothers is few (about four), data suggests that most of the mothers are cooperating with child welfare authorities and are taking steps to improve the quality of their living situation, housing, parenting skills, family cohesion, and family relationships in general.

Clients are also making strides in the area of employment. Twenty-six percent of the clients began services employed. By discharge from AODA services, 59 percent were employed.

At the start of AODA services, most, if not all of the clients were involved with the criminal justice system, typically probation or parole. Others were involved with the legalities of child custody. Few, if any, were without pending legal issues. At the conclusion of services, 88 percent of the clients have had no new criminal justice or legal involvement.

William White: The New Recovery Movement

In his paper, "The New Recovery Movement," White describes an emerging new movement around the country that shows, "with faces, with stories, with numbers," that addiction recovery is a reality for individuals, families, neighborhoods, and communities.

White describes the movement as: *"... recovering people across the United States joining together to achieve goals that transcend their mutual support needs. Collectively, these communities without boundaries are expanding local recovery support services, advocating for the needs of addicted and recovering people, and finding creative ways to make amends and carry hope to others."*

White identifies the goals that people and groups in this movement share:

- Portraying addiction as a problem with viable and varied recovery solutions.
- Providing living recovery role models.
- Countering public attempts to dehumanize and demonize those with AOD problems.
- Enhancing treatment and recovery support services.
- Removing barriers to recovery.

"It is time for a new movement: a new recovery movement. The centerpiece of this movement must not be the proclamation that 'alcoholism is a disease' or that 'treatment works' but instead the proclamation that recovery is a reality in the lives of hundreds of thousands of individuals, families and communities." White continues: *"Leadership of this movement must come, not from the professional*

community, but from recovering people and their families. It is time for recovering people to break their collective silence, announce their presence in the culture, and begin educating and advocating on behalf of those who have yet to achieve recovery."

William White's paper is a must-read for anyone interested in the publicly-active recovery community. The full paper as well as White's abridged version is available on The Alliance Project's web site:

www.defeataddiction.org.

Wisconsin's STAR Shines

A recent article in *The Capital Times* introduced Sharing Treatment and Recovery (STAR) in the "SAVVY" Section, News for Today's Women. Susan Isberner, the STAR point of contact in Madison, shared her own story to offer hope for a better way of life to those still suffering in the shadows of addiction. Isberner said in the article that "Putting a name and face to recovery helps to bring these issues out."

"Women in STAR groups are gathering to support one another in their recovery," reports Darcy DiStefano, project coordinator of the Wisconsin grass-roots effort, funded by the federal Center for Substance Abuse Treatment. She explains that each group takes on its own personality, participating in various activities to raise awareness about addiction as a health issue, including cancer walks and fund raising to purchase books about women and health care for local libraries.

There are nine STAR advocacy groups for women in recovery from addictions with more than 400 members. For additional information on STAR, contact Darcy DiStefano

at (608) 263-9768 or e-mail: dad@mail.dec.wisc.edu.

HFS 75

Wisconsin is seven months into the implementation of HFS 75, the Community Substance Abuse Service Standards. The Bureau of Substance Abuse Services would like to thank those of you who provided public input by attending one of the three public hearings or writing to the Bureau with your comments. The Standards address the need to provide services to clients, achieve standardization across a field of diverse access to services, and enhance the standard of credentialing.

Copies of HFS 75 may be downloaded and printed by visiting the Bureau's web site at www.dhfs.state.wi.us/substabuse. On the index page, select HFS 75 - Substance Abuse Standards and you will be linked to the Legislation page. See the Bureau's web site for additional links relating to the Standards, such as frequently asked questions (FAQs) and a summary of the public hearings.

Death of Judi Molitor Follows Long Illness

After suffering a stroke in the mid-1990s, and many years in a coma, long time AODA consultant and trainer Judi Molitor passed away on December 2, 2000. *The Judi Molitor Memorial* has been established at the Bank of Kaukauna, 264 West Wisconsin Avenue, Kaukauna, WI 54130, to underwrite the continuing education of counselors in the field of substance abuse.

"In Denial"? A Motivational Enhancement Approach

By Henry Steinberger, Ph.D.

"Research demonstrates that a counselor can drive resistance (denial) levels up and down dramatically according to his or her personal counseling style," says William Miller, creator of Motivational Interviewing. Hence, we might better bring clients face to face with difficult reality and so initiate change by the use of a "respectful, reflective approach" advocated in his Motivation Enhancement Therapy (MET), rather than by argumentation, direct confrontations and the accusation of "being in denial."

In AODA treatment and training, there is often an absolute demand that we accept, as fact, the catechism that *Addiction is a disease and denial its symptom*. Denial is then viewed as a character trait of addicts requiring strong, direct confrontation.

But research shows that this "reactance" (resistance to demands for change) as well as ambivalence is normal and that all people, addicts and non-addicts alike, tend to resist change. Unfortunately, we elicit defensiveness and denial with direct confrontations and may then attribute the resulting resistance and poor motivation to the client's personality. After all, it couldn't be anything that we are [deliberately] doing. We, thus, reinforce our old belief, and we seal the deal with the Catch-22 accusation that the client is "in denial."

MET sees resistance as "an interpersonal behavior pattern influenced by the therapist's behavior." MET suggests that the therapist roll with resistance, avoid argumentation, and develop awareness of problems and discrepancies by various forms of reflection that evoke statements of problem perception and need for change from the client. Similarly, open-ended questions draw out and explore the client's natural, though often initially overwhelming, ambivalence towards making big life changes like stopping [or even cutting back] on their drinking. For more information, see Miller, W.R. "Motivational Enhancement Therapy: Description of Counseling Approach" in Boren, J.J. Onken, L.S. & Carroll, K.M. (Eds.) *Approaches to Drug Abuse Counseling*, National Institute on Drug Abuse, 2000, pp. 89-93, or contact Henry Steinberger, Ph.D., at hsteinberger@earthlink.net

Program Review: A Way to Show Your Success

The federal Substance Abuse Block Grant requires that the Bureau of Substance Abuse Services conduct independent peer reviews of AODA providers receiving federal block grant funds. These one-day program reviews are not "inspections" nor are they used for certification or any other form of compliance monitoring. The reviews are designed to be "consultative." A panel of peer clinicians advises the selected program about strengths and areas needing improvement. The findings of any individual program review are strictly confidential and for the sole use of the program being reviewed. Panel members must be currently working in the AODA field (with the exception of a consumer participant) and have at least five years experience and possess a wide range of skills and knowledges.



Front row from left: Terri Lorenzini, BSAS; Susan Andrew, Counseling Associates, Inc.; Willa Portman, Langlade Health Care Center. Back row from left: George Thoottakara, Marinette Co. HSD; Jim Hahn, Langlade Health Care Center; John Vick, BSAS; Pete Scheinert, Langlade Health Care Center.

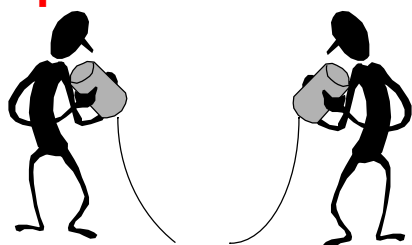
One agency said of this review, "Overall we found the survey interesting and helpful in that it afforded us the opportunity to see how other professionals knowledgeable in our field view us." As the above photo illustrates, in May 2000, a Program Review was conducted in Langlade County. The

team consisted of BSAS representatives, non-Langlade County AODA certified counselors, and Langlade Health Care Center AODA staff.

Substance Abuse Services in Wisconsin: 1999 Annual Report

The Annual Report, completed in November 2000, is available from the Bureau of Substance Abuse Services. Request a copy by calling (608) 266-2717 or by e-mail: langejb@dhfs.state.wi.us. The report is also available to read and download on the BSAS web site: www.dhfs.state.wi.us/substabuse.

Teleconference Update



A glitch in the popular, well-attended Research to Practice Teleconference series caused the program on November 14 to be cancelled. This was due to technical difficulties at the UW, where coordination of the teleconference system takes place, resulting in another teleconference being heard simultaneously along with Dr. Bohn. The November session on medications was aired on February 13, 2001, and materials are available on the teleconference pages at the BSAS web site: www.dhfs.state.wi.us/substabuse.

Transitions

SUZANNE BACH, BSAS Program Assistant in the Program Systems &

Development Section, has transferred to the Division of Health Care Financing in DHFS. Sue worked with Vince Ritacca on HFS 75 and on many other projects within the Bureau.

BONNIE SHEBELSKI, Program Assistant for the State Council on Alcohol and Other Drug Abuse, has taken a position at the Department of Agriculture. Bonnie was a visible figure in State Council meetings and working with the Standing Committees.

MARCIA DALY, the BSAS Director's Program Assistant, has taken the position vacated by Suzanne Bach. Marcia is looking forward to a new focus in her career. She will be working with the implementation of HFS 75, the Uniform Placement Criteria, and the joint Substance Abuse/Mental Health Blue Ribbon Commission.

RITA SCHRAEPFER-DERKE, a former BSAS Program Assistant in the Referral and Monitoring Unit, has returned as the Program Assistant for Philip McCullough, BSAS Director. Rita has spent the past several years working in the Division of Public Health, Maternal and Child Care.

The Importance of Words

The National Alliance Project (see Summer 2000 BSAS News), through its Focus Group findings, provides further evidence that the phrase "substance abuse" does not accurately and effectively describe medical and disease-related implications. When asked what the phrase "substance abuse" means to them, focus group participants said it refers to illegal drugs, but not necessarily alcohol, and conjures up images of youthful, recreational drug

use gone awry. It also does not suggest to people that this is a disease or medical issue. When asked to comment on an alternative such as "the disease of alcohol and drug addiction," people felt it clearly encompassed illegal drugs and alcohol, different age groups, and described a problem that is too serious to ignore. Although widely used, the phrase "substance abuse" fails to effectively describe the all-encompassing seriousness and disease-nature of addiction. It is another reminder of the importance of choosing the appropriate words to communicate a message.

Keeping up with Breaking News: BSAS to Develop an Email "Listserve"

The Bureau is researching ways to alert the field about breaking news, cutting edge research data and funding opportunities. Computer technology, digital formats for videos, CD ROM technology, web technology and e-mail listserves are examples. Listserves are established groups of subscribers on e-mail who automatically receive selected information. Subscribers have the option to unsubscribe if they choose. There are many listserves or bulletin boards available; the task will be to select a format best suited to our specific interests. One such group is Join Together On-line (JTO). You may visit the BSAS web site to sample Join Together; it is listed on the Bureau's home page. Try it out. If it doesn't fit your needs, you can have your name removed. For more information, e-mail Jackie Langetieg: langejb@dhfs.state.wi.us. This way your e-mail address will be correct as the project is developed.

UW Offers On-line Clinical Supervision Course

The University of Wisconsin-Madison, Department of Professional Development & Applied Studies, is offering a 32-hour **on-line** course titled, "Clinical Supervision of Substance Abuse Personnel." The program begins March 5, 2001 and ends April 29, 2001. The course includes a text book, assignments and discussion sessions in on-line chat rooms.

The Bureau of Substance Abuse Services is providing the \$250 course fee for 15 people to participate in the program. Participants must be:

- Certified AODA counselors
- Working in an AODA agency
- Recommended by their clinical supervisor

To receive a financial aid application, contact Merrilee Pickett, UW-Madison, 317 Lowell Center, Madison, WI 53703, (608) 263-8268 or e-mail her at mpickett@dc.s.wisc.edu

Training Events and Conferences

April 5-6, 2001: Waukesha County Council on Alcoholism and Other Drug Abuse, Inc., presents the 3rd Annual Conference on Women and Special Topics in Addiction: "Drowning the Sorrow-Healing the Pain." Best Western-Midway Hotel, Brookfield, WI. Stephanie S. Covington, Ph.D., presenter. Call (262) 524-7921, ext. 109, for more information.

May 14-16, 2001: Wisconsin Association on Alcohol and Other Drug Abuse Annual Conference. "Balancing Art with Science:

Validating Best Practice with Research," at the Marriott West Hotel, Madison. For information call WAAODA at (608) 276-3400.

June 18-21, 2001: Third National Conference on Women: "A Generational Journey, Women Carrying the Vision" sponsored by SAMHSA. Conference to be held in Orlando, FL. Check the SAMHSA web site for updated information: www.samhsa.gov/news/click4_frame.html

The following training events are sponsored by UW-Madison. For more information contact: Merrilee Pickett at Professional Development and Applied Studies, 313 Lowell Center, 610 Langdon Street, Madison, WI 53703. Telephone 263-8268 or (800) 442-4617; fax 265-2329 or visit their web site: <http://www.dcs.wisc.edu/>

April 30, 2001, Applying Research to Practice in Substance Abuse Settings. Fee: \$85, Classroom hours: 6, WADCCB Hours: 6, CEUs: 0.6

The Substance Abuse Certificate Program

The following training events will be held at the Pyle Center and are sponsored by UW-Madison.

Course 1: March 12, 2001
Fundamentals of substance abuse. \$85, 0.6 CEU, Limit: 50.

Course 2: March 13, 2001
Psychoactive substances. \$85, 0.6 CEU, Limit: 50.

Course 3: April 23, 2001.
Signs & symptoms of substance abuse. \$85, 0.6 CEU, Limit: 40.

Course 4: April 24, 2001
The impact of substance abuse on families. \$85, 0.6 CEU, Limit: 40.

Course 5: May 7- 8, 2001
Skills for working with substance

abusers. \$185, 1.2 CEU, Limit: 50. (Note: This course can only be taken if you have completed Courses 1-4.)

Bureau of Substance Abuse Services Teleconference Series Courses.

- **February 13, 2001** Cognitive mapping enhancements of treatment for substance abusers. **Don Dansereau, Ph.D.,** Texas Christian University.
- **March 13, 2001** Medications for treatment of alcohol dependence **Michael Bohn, M.D.**

Contact Jamie McCarville at (608) 267-7714 or e-mail mccarjm@dhfs.state.wi.us for more information

On the Web

From the National Addiction Technology Transfer Center (NATTC):

AddictionED.org. What is it?
www.addictionED.org

This web site was created by the ATTC to serve as a national reference for distance education opportunities in the field of addictions. All providers of distance education products who meet the ATTC membership criteria can post their offerings on this site. Courses on this site are offered by educational institutions, continuing education providers and the ATTC Network.

Other information available at www.nattc.org:

- Instant Resources for Employee Assistance Programs.
- Untangling the Web, A Guide for Treatment Programs.



LifeRing Secular Recovery: *Empower your sober self.*

The "Three-S" Philosophy

"Three-S" is shorthand for the fundamental principles of LifeRing Recovery: Sobriety, Secularity, and Self-Help. Following is how LifeRing describes its program:

Sobriety. "Sobriety" can mean different things in dictionaries, but in LifeRing it always means abstinence. The basic membership requirement is a sincere desire to remain abstinent from alcohol and "drugs." LifeRing welcomes alcoholics and addicts without distinction, as well as people involved in relationships with them.

Secularity. LifeRing Recovery welcomes people of all faiths and none.

Self-Help. Self-help in LifeRing means that the key to recovery is the individual's own motivation and effort. The main purpose of the group process is to reinforce the individual's own inner strivings to stay clean and sober.

LifeRing participation is compatible with a wide variety of abstinence-based therapeutic or counseling programs. For more on our concept of self-help, read the LifeRing brochure "[Self Help Is What We Do](#)," and read the LifeRing [Handbook of Secular Recovery](#). For additional information, visit the LifeRing web site at: www.unhooked.com

AODA PR Video Available

"Drug Addiction: The Promise of Treatment" is a short public relations video about substance abuse that will appeal to a wide variety of audiences. Brown University's Physician Leadership on National Drug Policy group (PLNDP) has produced a 17-minute documentary-type video that provides a basic overview of substance abuse and treatment. The video features persons in recovery and provides evidence for treatment effectiveness. Contact your county AODA Coordinator or PLNDP at (401) 444-1817 for information on how to borrow or obtain the video.

Research (Continued from Page 1.)

The Bureau of Substance Abuse Services is committed to a continued awareness of evolving treatment philosophies and strategies. Progress toward these goals will be documented through measured outcomes. With this commitment and vision within DSL/BSAS, research-to-practice learning clinics will be presented throughout the state in the future.

Background For the Initiative

In the fall of 1999, the Bureau of Substance Abuse Services initiated a far-reaching multi-disciplinary effort to integrate research and clinical practice in the substance abuse field. This Initiative evolved from a growing local and national awareness that much of the research on substance abuse and addiction treatment was not finding its way into clinical practice and was not being used to support public policies favorable to treatment and to the people who need it.

In December 1999, the Great Lakes Addiction Technology Transfer Center (GLATTC) held its Advisory Board meeting in Wisconsin. At that meeting, BSAS Director Philip McCullough and other GLATTC Advisory Board members discussed the possibility of a partnership with GLATTC in the Wisconsin Research-to-Practice Initiative.

It was a natural alliance. One of the major goals of the 13 Addiction Technology Transfer Centers nationwide is the unification of research, practice, and education, and Wisconsin and GLATTC had already established an effective collaborative relationship. GLATTC Director Loretta Albright expressed a willingness to support Wisconsin's effort with training, technical assistance, document development, and evaluation services.

The timing of this Initiative was right. Wisconsin was in the process of rewriting its substance abuse standards, Administrative Rule HFS 75. Improvements emphasized in the new Rule included greater clinical supervision, improved quality of care, and support for the latest research-based practice. In addition, BSAS was about to launch a series of monthly research-based addiction treatment teleconferences involving several nationally recognized researchers.

With outcome requirements in the Substance Abuse Prevention and Treatment Block Grant, the DSL/BSAS is piloting initiatives such as this to develop service delivery based on the most current research based results.



From left: Susan Dreyfus, Administrator, DHFS/DCFS; Jennifer Noyes, Administrator, DWD/DES; Karen Ordinans, Milwaukee County Board Chair; Sinikka McCabe, Administrator, DHFS/DSL at the Milwaukee celebration.

Milwaukee (from Page1.)

The initiative was funded with Substance Abuse Prevention and Treatment Block Grant funding for the period October 1, 1999, through September 30, 2000. DHFS subcontracted with Wraparound Milwaukee and the Planning Council for Health and Human Services to manage portions of the program.

Consumer involvement and the identification of core values were key to the design and implementation of the Initiative.

Actions undertaken during the Initiative include:

- Identification and analysis of system barriers for families with provision of recommendations for policy change to reduce/resolve barriers.
- Modeling the wraparound philosophy of care and developing single coordinated care plans for families with multi-system involvement.
- Provision of wraparound and cross-systems training.
- A survey of consumers to identify consumer access, knowledge and satisfaction with services; specific consumer expectations and experiences with services; and consumer

recommendations for improving services.

- A comprehensive evaluation of the initiative, which includes outcomes for families served during the initiative period.

Recommendations for the future delivery system include the following:

- Development of common gender and culturally specific needs identification tools for mental health and AODA.
- Use of a single coordinated care plan for consumers with multiple system involvement.
- Policies, procedures, and practices of all systems to accommodate consumer-focused, family-centered, gender and culturally competent services based on core values.
- Ongoing cross-systems training and wraparound training for managers and line workers in all systems.
- All funding sources should support a consumer-focused, family-centered approach to services.
- Funding sources should be transparent to the consumer.

For additional information about this project, see: www.fare-wi.org



Focus: Underage Drinking

The National Council on Alcoholism and Drug Dependence has launched its 15th annual Alcohol Awareness Month - April 2001. The Organizer's Guide contains a sample proclamation; media advisory and news release; 30 radio PSA scripts; Op/Ed piece; letter to the editor and suggested grassroots activities.

In addition, you may download from the web site the following materials:

- Camera-Ready Advertisements
- Youth, Alcohol and Other Drugs Fact Sheet
- A 2001 Resource and Referral Guide.

Visit the NCADD web site at www.ncadd.org to view step-by-step directions for your community or organization.

Alcohol-Free Weekend, traditionally observed during Alcohol Awareness Month in April, is scheduled for April 6-8, 2001. The Bureau of Substance Abuse Services asks parents and other adults to abstain from drinking alcoholic beverages for a 72-hour period to demonstrate to young people that alcohol isn't necessary to have a good time. If participants discover they can't go without a drink during this period, they are urged to call 800/622-2255 for information about alcoholism.

SUBSTANCE ABUSE SERVICES

Department of Health & Family Services
Division of Supportive Living
Bureau of Substance Abuse Services
1 West Wilson St., P.O. Box 7851
Madison WI 53707-7851

First Class Mail
U.S. Postage Paid
Madison, WI
Permit No. 1369

Addiction Services On the Internet:

www.dhfs.state.wi.us/substabuse

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Please detach the portion of this page with your mailing label. Correct the address (or if wish to be removed from the mailing list, note that) and mail in envelope to: SA News, P.O. Box 7851, Madison, WI 53707-7851. Thank you.

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